



State of Utah

Department of  
Natural Resources

ROBERT L. MORGAN  
*Executive Director*

Division of  
Oil, Gas & Mining

LOWELL P. BRAXTON  
*Division Director*

OLENE S. WALKER  
*Governor*

GAYLE F. McKEACHNIE  
*Lieutenant Governor*

OK

October 22, 2004

CERTIFIED MAIL  
7099 3400 0016 8895 5590

Wendell Owen, Mine Manager  
Co-Op Mining Company  
P.O. Box 1245  
Huntington, Utah 84528

Re: Notice of Nonrenewal of Liability Insurance, Bear Canyon Mine, Co-Op Mining Company, C/015/0025, Outgoing File

Dear Mr. Owen:

The Division received notice on October 14, 2004, that the insurance coverage for the general liability insurance for the Bear Canyon Mine, as required by R645-301-890, will not be renewed (enclosed). The insurance coverage on record at the Division notes that this current policy will expire January 1, 2005.

Please be advised that public liability insurance must be maintained in full force during the life of the permit.

If you have any questions, please call me at (801) 538-5268.

Sincerely,

A handwritten signature in black ink, appearing to read "Pamela Grubaugh-Littig".

Pamela Grubaugh-Littig  
Permit Supervisor

an  
Enclosure  
cc: Price Field Office  
O:\015025.BCN\FINAL\pgl\liabilityinsurancenotice.doc

0033

NATIONAL UNION FIRE INSURANCE COMPANY PA  
70 PINE STREET  
NEW YORK NY 10270

## NOTICE OF NONRENEWAL OF INSURANCE

RECEIVED

OCT 14 2004

DIV. OF OIL, GAS & MINING

Named Insured & Mailing Address:

C W MINING  
P. O. BOX 57534  
SALT LAKE CITY UT 84157

Producer: 50972

BENNION TAYLOR INSURANCE  
461 WEST MURRAY BLVD  
SALT LAKE CITY UT 84123

*Incoming  
10/15/2004  
Copy PAAH*

Policy No.:  
Type of Policy: GENERAL LIABILITY OCCURRENCE  
Date of Expiration: 01/01/2005; 12:01 A.M. Local Time at the mailing address of the Named Insured.

We will not renew this policy when it expires. Your insurance will cease on the Expiration Date shown above.

The reason for nonrenewal is Underwriting Reasons

If you believe that we have not stated with reasonable precision the facts upon which our decision is based, you may make a written request that we provide you with these facts. This information will be provided to you within 10 days of the receipt of your written request.

You may request we provide you information about losses under this policy and previous policies, which we have issued to you, not to exceed 3 years. The information will give you details of closed claims, open claims and notices of occurrences. We will provide the information to you within 30 days from the date we receive your written request.

Other Party of Interest

DIVISION OF OIL, GAS & MINING  
1594 WEST N. TEMPLE  
BOX 145801  
SALT LAKE CITY UT 84114-5801

Date Mailed:  
11th day of October, 2004

*Mike Shiley*  
AUTHORIZED REPRESENTATIVE